136067

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response...... t 6.00

| SEC USE ONLY | | | | |
|--------------|---------|--------|--|--|
| Prefix | | Serial | | |
| | | | | |
| DAT | E RECEI | VED | | |
| _ | | · · | | |

| Name of Offering (check if this is an amendment and name has changed, | and indicate change.) | | |
|--|--|-----------------------------|--------------------------|
| Participating Shares of Loomis Sayles Energy Hedge Fund Ltd. | | | |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule | le 506 🗌 Section 4(6) 🔲 U | LOE IIIIIII | 0 1064 90 6616 |
| Type of Filing: New Filing Amendment | | (| 1874 (1941 186)) |
| A. BASIC I | DENTIFICATION DATA | | [2]([04]) |
| Enter the information requested about the issuer | | 1111111 | |
| Name of Issuer (check if this is an amendment and name has changed, an | d indicate change.) | <u> </u> | 07079677 |
| Loomis Sayles Energy Hedge Fund Ltd. | | | |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Tele | phone Number (including Are | a Code) |
| c/o Walkers SPV Limited, P.O. Box 908GT, Walker House, Mary Street | , (345) | 945-4757 | |
| George Town, Grand Cayman, Cayman Islands | | | |
| Address of Principal Business Operations (Number and Street, City, State, Z | ip Code) Teler | phone Number (including Are | a Code) |
| (if different from Executive Offices) | | | |
| c/o Loomis, Sayles & Company, L.P. | (617) | 748-1754 | |
| One Financial Center, Boston, MA 02111 | <u></u> | | |
| Brief Description of Business | | | |
| Private investment fund. | <u>. </u> | | <u> </u> |
| Type of Business Organization | | | ı |
| corporation limited partnership, already formed | | | İ |
| | 🖾 other (please | specify); Cayman Islands ex | tempted company |
| business trust limited partnership, to be formed | | <u> </u> | |
| Month | Year | | DDOOECCED |
| Actual or Estimated Date of Incorporation or Organization: | 0 5 🛮 Actua | l Estimated | PROCESSED |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal S | Service abbreviation for State: | | |
| | for other foreign jurisdiction) | | CT 15 2007 |
| GENERAL INSTRUCTIONS | | | |
| | | | THÒMSON |

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 FINANCIAL

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (5/91)

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - X Each promoter of the issuer, if the issuer has been organized within the past five years;
 - X Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - X Each general and managing partner of partnership issuers.

| Check Box(es) that Apply: | ⊠Promoter | ☐ Beneficial Owner | Executive Officer | Director | ☐ General and/or Managing Partner |
|--|--------------------------------------|---|-----------------------------|------------|-----------------------------------|
| Full Name (Last name first, Loomis Sayles & Company, I | ,.P | | | - | |
| Business or Residence Adda One Financial Center, Boston | | | o Code) | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | □ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, Charleston, Kevin | if individual) | | | | |
| Business or Residence Adde c/o Loomis, Sayles & Compar | ress (Number ar ny, L.P., One Fin | nd Street, City, State, Zip nancial Center, Boston, Ma | Code) assachusetts 02111 | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | □ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, Kloppenburg, Lauriann | , | | | | |
| Business or Residence Addi c/o Loomis, Sayles & Compar | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ress (Number ar | nd Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ress (Number ar | nd Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ess (Number ar | nd Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ess (Number ar | nd Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ess (Number ar | nd Street, City, State, Zip | Code) | | |
| | | | | | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

| | | | · - - | | B. INFO | RMATIC | N ABOU | T OFFER | RING | | | | | |
|------------------------------|--|------------------------------|------------------------------|---|---|------------------------------|--------------------------------|-------------------------------|---|------------------------------|---|---------------------------------------|-----|---------|
| 1. Has t | the issuer sol | ld, or does t | he issuer in | tend to sell | , to non-acc | redited inv | estors in thi | s offering? | *************************************** | ************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ••••• | Yes | No ⊠ |
| | | | | , | Answer also | in Append | lix Column | 2 if filing | under ULC | Æ | | | | |
| | | | | | | * • | | | | | | | | |
| | What is the minimum investment that will be accepted from any individual? *Subject to the discretion of the Board of Directors | | | | | | | \$ 1,000, | ,000* | | | | | |
| 3. Does | 3. Does the offering permit joint ownership of a single unit? | | | | | | Yes ⊠ | No | | | | | | |
| remu perso | the information for or agent o (5) persons to | solicitation f a broker o | of purchas r dealer reg | ers in conne | ction with the SEC a | sales of sec nd/or with: | urities in th a state or st | e offering. ates, list the | If a person name of th | to be listed to broker or | is an assoc dealer. If i | iated more than | | |
| Full Name (| | - | idual) | | | | _ | | | | | | | |
| Loomis Say Business or | | | mber and S | treet City | State 7im/ | Code) | | | | - | | | | |
| One Finance | | | | areet, City, | State, Zip t | Loue) | | | | | | | | |
| Name of Ass | sociated Bro | ker or Deal | ег | | | | | | | | | | | |
| States in Wh | ich Person I | isted Has | Solicited or | Intends to | Solicit Purc | hacere | | | | | | | | |
| | | | | | | | | | | | | | | |
| (Check | "All States" | " or check i | ndividual S | tates) | | •••••• | **************** | | | 🛭 | All States | | | |
| [AL] [IL] | [AK] [IN] | [AZ] [IA] | [AR] [KS] | [CA] [KY] | [CO] [LA] | [CT] [ME] | [DE] [MD] | [DC] [MA] | [FL] [MI] | [GA] [MN] | [HI] [MS] | [ID] [MO] | | |
| [MT] [RI] | [NE] [SC] | [NV] [SD] | [NH] [TN] | (NJ) [TX] | (NM) (TU) | [NY] [VT] | [NC] [VA] | [ND] [WA] | [OH] [WV] | (OK) (WI) | [OR] [WY] | (PA) (PR) | | |
| Full Name (I | | | | [] | | 11 | | [1, 1, 1, | 1 | . 11 | | [6,65] | | |
| Nighthawk | | | | | | | | | | | | | | |
| Business or 1 473 Sylvan | | | | | State, Zip (| (ode) | | | | | | | | |
| Name of Ass | | | | | | | | | | | | | | |
| States in Wh | ich Person I | isted Has S | Solicited or | Intends to S | Solicit Purc | hasers | | | | | | | | |
| (Check "All | States" or cl | neck individ | iual States) | *************************************** | *************************************** | | ••••• | | ••••• | 🗵 | All States | | | |
| (AL) (IL) (MT) (RI) | [AK] [IN] [NE] [SC] | [AZ] [IA] [NV] [SD] | [AR] [KS] [NH] [TN] | [CA] [KY] [NJ] [TX] | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] (MD) (NC) (VA) | [DC] [MA] [ND] [WA] | (FL) (MI) (OH) (WV) | [GA] [MN] [OK] [WI] | (HI) (MS) (OR) (WY) | [ID] [MO] [PA] [PR] | | |
| Full Name (I | | | | | | | | | | | | [2.44] | | |
| Business or l | Residence A | ddress (Nu | mber and S | treet, City, | State, Zip C | ode) | | | | | | | | |
| Name of Ass | ociated Bro | ker or Deal | er | | | <u> </u> | | | | · | | 2.200 | | |
| States in Wh | ich Person I | isted Has S | Solicited or | Intends to S | Solicit Purc | hasers | | | · · · · · · | | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | |
| (Check "All | States" or ch | neck individ | lual States) | ************* | ******************************* | ***************** | | ******** | | | All States | | | |
| [AL] [IL] [MT] [RI] | [AK] [IN] [NE] [SC] | [AZ] [IA] [NV] [SD] | [AR] [KS] [NH] (TN] | [CA] [KY] [NJ] [TX] | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | (ID) (MO) (PA) [PR] | | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

| | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF | PROCEEDS | |
|----|---|-----------------------------|--------------------------------------|
| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | |
| | Type of Security | Aggregate Offering Price | Amount Already Sold |
| | Debt | S | s |
| | Equity | \$ | s |
| | ☐ Common ☐ Preferred | | |
| | Convertible Securities (including warrants) | \$ | s |
| | Partnership Interests | \$ | s |
| | Other (Specify) Participating Shares | \$ 300,000,000 | \$ 20,400,000 |
| | Total | \$ 300,000,000 | \$ 20,400,000 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | |
| | | Number Investors | Aggregate Dollar Amount of Purchases |
| | Accredited Investors | 2 | \$ 20,400,000 |
| | Non-accredited Investors | | s |
| | Total (for filings under Rule 504 only) | | S |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. | | |
| | Type of offering | Type of Security | Dollar Amount Sold |
| | Rule 505 | | S |
| | Regulation A | | S |
| | Rule 504 | | s |
| | Total | | s |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | |
| | Transfer Agent's Fees | | s |
| | Printing and Engraving Costs | | s |
| | Legal Fees | ⊠ | \$ 50,000 |
| | Accounting Fees | | S |
| | Engineering Fees | | S |
| | Sales Commissions (specify finders' fees separately) | | \$ |
| | Other Expenses (identify) | | \$ |
| | Total | ⊠ | \$ 50,000 |

| | C. OFFERING PRI | CE, NUMBER OF INVESTORS, EXPENSES AND U | USE OF PROCEEDS | | | |
|------|--|---|---|-------------------------|--|--|
| 4. | | ering price given in response to Part C - Question 1 and to on 4.a. This difference is the "adjusted gross proceeds to | | \$ 299,950,000 | | |
| 5. | the purposes shown. If the amount for any purpo | proceeds to the issuer used or proposed to be used for eac se is not known, furnish an estimate and check the box to ted must equal the adjusted gross proceeds to the issuer s | the | | | |
| | | | Payments to Officers, Directors, & Affiliates | Payments To Others | | |
| | Salaries and fees | *************************************** | S | □ s | | |
| | Purchase of real estate | ······ | 🗆 S | □s | | |
| | Purchase, rental or leasing and installation of mad | hinery and equipment | s | □s | | |
| | Construction or leasing of plant buildings and fac | ilities | | □s | | |
| | Acquisition of other businesses (including the val offering that may be used in exchange for the ass pursuant to a merger) | | □ \$ | □s | | |
| | Repayment of indebtedness | | | □ s | | |
| | Working capital | | | □ s | | |
| | Other (specify): Investments in securities and e | xpenses necessary, convenient, or incidental thereto. | □ s | S 299,950,000 | | |
| | Column Totals | | s | ⊠ \$ 299,950,000 | | |
| | Total Payments Listed (column totals added) | | 🛛 \$ 299, | ⊠ \$ 299,950,000 | | |
| | | D. FEDERAL SIGNATURE | | · | | |
| n ui | | ne undersigned duly authorized person. If this notice is fi ities and Exchange Commission, upon written request of | | | | |
| Iss | uer (Print or Type) | Signature (| Date | | | |
| | omis Sayles Energy Hedge Fund Ltd. | | October 5, 2007 | | | |
| | me of Signer (Print or Type) chard Fellows | Title of Signer (Print or Type) | | | | |

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION

